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PATENT APPLICATION FEE DETERMINATION RECORD			Application or Docket Number 10/076172 306812002000	
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CLAIMS AS FILED - PART I

(Column 1) (Column 2)

FOR	NUMBER FILED	NUMBER EXTRA	SMALL ENTITY	OR	OTHER THAN SMALL ENTITY
BASIC FEE (37 CFR 1.16(d))				\$370.00	
TOTAL CLAIMS (37 CFR 1.16(c))	20 minus 20 =	0	x\$9.00	\$*	OR \$18.00 \$0
INDEPENDENT CLAIMS (37 CFR 1.16(b))	3 minus 3 =	0	x\$42.00	\$*	OR \$84.00 \$0
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))			+\$140.00	\$*	OR \$280.00 \$0
			TOTAL	\$*	OR TOTAL \$740.00

*If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	SMALL ENTITY	OR	OTHER THAN SMALL ENTITY
						RATE	ADDI- TIONAL FEE	RATE
	Total (37 CFR 1.16(c))	17	Minus	20	=*	x\$9.00	\$*	OR \$18.00 \$0
	Independent (37 CFR 1.16(b))	3	Minus	3	=*	x\$42.00	\$*	OR \$84.00 \$0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+\$140.00	\$*	OR \$280.00 \$0
						TOTAL ADDT. FEE	\$*	OR TOTAL \$740.00

(Column 1)

(Column 2)

(Column 3)

AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	SMALL ENTITY	OR	OTHER THAN SMALL ENTITY
						RATE	ADDI- TIONAL FEE	RATE
	Total (37 CFR 1.16(c))		Minus		=*	x\$9.00	\$*	OR \$18.00 \$0
	Independent (37 CFR 1.16(b))		Minus		=*	x\$42.00	\$*	OR \$84.00 \$0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+\$140.00	\$*	OR \$280.00 \$0
						TOTAL ADDT. FEE	\$*	OR TOTAL \$740.00

(Column 1)

(Column 2)

(Column 3)

AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	SMALL ENTITY	OR	OTHER THAN SMALL ENTITY
						RATE	ADDI- TIONAL FEE	RATE
	Total (37 CFR 1.16(c))		Minus		=*	x\$9.00	\$*	OR \$18.00 \$0
	Independent (37 CFR 1.16(b))		Minus		=*	x\$42.00	\$*	OR \$84.00 \$0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+\$140.00	\$*	OR \$280.00 \$0
						TOTAL ADDT. FEE	\$*	OR TOTAL \$740.00

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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